

# CITY OF KAWARTHA LAKES FAMILY HEALTH TEAM

## POSITION DESCRIPTION CLINICAL SOCIAL WORKER

**POSITION:** CLINICAL SOCIAL WORKER      **STATUS:** FULL TIME      PART TIME

**DEPARTMENT:** MENTAL HEALTH CARE      **REPORTING TO:** EXECUTIVE DIRECTOR

---

### APPROVAL SIGNATURES

---

**APPROVED BY BOARD CHAIR**

---

**DATE**

### **PURPOSE**

The Social Worker is a specialist in assessment, treatment and evaluation of individual, interpersonal and societal issues and responsible for the planning, coordination and delivery of social services to individuals, dyads, families, groups and populations. Working in collaboration with an interdisciplinary team, the Clinical Social Worker patient provides case management services to FHT patients on a referral basis from family physicians and FHT interdisciplinary health providers.

### **Accountability:**

The Clinical Social Worker is to practice within the scope and according to the standards of practice as outlined in the following documents:

- Ontario College of Social Workers and Social Service Workers' *Standards of Practice* ([www.ocswssw.com](http://www.ocswssw.com))
- Ontario Regulated Health Professionals Act (1991) and the *Social Work and Social Service Work Act* (1998)

### **DUTIES AND RESPONSIBILITIES**

#### **Assessment**

- Screens, prioritizes and processes patient referrals from family physicians and other FHT staff.
- Coordinates the assessment of the psychosocial, social and coping status and its impact on physical, mental and relational/social health.
- Reviews patient clinical information obtained through physician referral, laboratory reports and health records.
- In a supportive, non-judgmental environment, conducts comprehensive patient assessments using assessment instruments, patient self-assessment, family assessment and interdisciplinary reports.

### **Planning**

- In collaboration with FHT physicians and FHT staff, develops and discusses appropriate individualized care plan with the patient / dyad / family, based on best practices.
- Assists in development of program calendars, identifying priorities, target dates and implementation strategies.
- Reviews current literature / resources to support preparation of education materials and tools.
- Develops and discusses appropriate individualized care plan with the patient based on best practices.
- Manages, reviews and makes recommendations regarding protocols for the improved social awareness of FHT patients.

### **Case Management**

- Assesses needs, plans care and reviews referred patients' health in relation to their access to social and health services from a holistic and health promotion perspective.
- Coordinates inter-disciplinary, social services with referred FHT patients.
- Advocates with and on behalf of referred FHT patients with social and health services agencies and organizations, as needed.
- Maintains a caseload of referred FHT patients and meet with them on a regular basis, as needed.
- Works from an inclusive, patient-centred, anti-oppressive approach to case management.

### **Implementation**

- Works in collaboration with interdisciplinary team to safely and effectively provide appropriate primary care to patients.
- Provides counselling, assists in the facilitation of an optimally supportive environment to meet patient needs.
- Ensures appropriate continuity of care within an identified circle of care, facilitating communication with the patients, family physicians, family members and other interdisciplinary health professionals.
- Facilitates group sessions using the principles of adult learning and best practices.
- Documents and maintains patient health records, meeting professional standards.
- Refers to other resources and services, arranges follow-up as necessary.

### **Administrative / Reporting**

- Prepares statistical reports for the Family Health Team and /or Ministry of Health and Long-Term Care.
- Completes documentation required to facilitate care (reports, referrals, forms, etc.)
- Maintains an organized appointment schedule.

### **Evaluation**

- Monitors and evaluates patient progress by reviewing clinical, behavioural and coping outcomes and revises treatment / care plan as indicated.
- Identifies key performance indicators, participates in the measurement of these indicators.
- Participates in workload measurement, evaluates results to identify trends in patient needs.

**Team Development**

- Works effectively within an interdisciplinary team, in varied practice settings, to improve access to primary care for the residents of City of Kawartha Lakes. The “patient” may be an individual, a family, a target group or a community.
- Acts as a “virtual” team member with the City of Kawartha Lakes Mental Health Services, maintaining collegial relations and optimizing communication.
- Provides case study psychosocial health consultation, conducts in-services and workshops for team members, other health professionals and community partners.
- Promotes awareness of the Corporation’s services and programs.
- Actively participates in staff, team and committee meetings as appropriate.
- Provides consultation as requested to community groups, partners and team members.
- Provides leadership and mentorship to social work students that enter the FHT on a placement. Participates in the education of other health professional students.
- Participates in the development, planning and evaluation of treatment, education, counseling and health promotion activities of the FHT.

**Professional Development**

- Maintains and develops professional competence through ongoing professional development. Fully participates in the Quality Assurance Program of the Ontario College of Social Workers and Social Service Workers.
- Stays current and aware of opportunities to implement new, evidenced-based methods of patient assessment and treatment.
- Maintain awareness and understanding of current mental health legislation.
- Participates in self-directed learning to ensure that practice remains relevant by attending professional conferences, e-learning and journal reviews.
- Participates on interdisciplinary committees to promote professional / interpersonal development.
- Participates in clinical projects / studies as required.

**Communication**

- Communicates effectively with health care team members to create a cohesive team and seamless services to the community.
- Communicates effectively with all patients, families, peers, other health care professionals and community partners.
- Participates in interdisciplinary meetings as required.

**Related Duties**

- Models the values and philosophy of the FHT.
- Exhibits a commitment to life-long learning.
- Maintains confidentiality of team, personnel and patient information.
- Facilitates appropriate in-house and external education sessions.
- Assists with planning and attend special events.
- Performs other associated duties as required.

**EDUCATION / EXPERIENCE:**

- Master of Social Work, ideally.
- Current registration with the Ontario College Social Workers and Social Service Workers.
- Basic CPR certification.
- Demonstrated 3 years experience counselling older adults (e.g. CBT, IPT, NT) in a primary care setting.
- Working knowledge of the Mental Health Act, Substitute Decisions Act and community mental health resources.

**SKILLS / ABILITIES:**

- Knowledge and proficiency in current, evidenced-based methods and practices of primary mental health counselling and case management, with an emphasis on health promotion and risk reduction for older adults.
- Superior leadership, organization, research, evaluation, time management, communication and interpersonal skills.
- Proficiency in the use of the computer hardware and software, particularly in Microsoft Word, Excel, Outlook.
- Desire and ability to update knowledge and skills through various means including technology-based opportunities, courses, workshops and conferences.
- Multi-tasking skills related to the delivery of efficient primary care including the ability to share information and teach while treating a patient.
- Exhibit an ability to be open and non-judgemental.
- Knowledge of the goals and structure of the organization, the policies and procedures and the programmes.
- Strong verbal and written communication skills and the ability to adjust language and terminology to suit the patient or group.
- Excellent interpersonal skills and ability to work effectively with patients, staff, physicians and community partners.
- Ability to work independently and use initiative and good judgement when performing duties.
- Exceptional customer service skills and patient focus.
- Demonstrated commitment to continued education.

**EQUIPMENT USED:**

Computer, printer, hand held, fax machine, multi-media projection unit, photocopier, phone, various teaching aides.

**CONTACTS:**

<b>INTERNAL</b>	<b>EXTERNAL</b>
Executive Director	Ministry of Health & Long-Term Care
Family Health Team Physicians and	Central East Local Health Integration

Administration	Network
Contracted Professional Staff	Community health and social services agencies, especially HHMHS, SIRCH and FSHC
Employees, including interdisciplinary health professionals and clerical staff	Non-Government Organizations
Contracted administrative support	Professional Association
Patients / Families	Ontario College of Social Workers and Social Service Workers
	Peers, other FHT Social Workers, community Social Workers
	Service Providers and Vendors

**PHYSICAL DEMANDS:**

Moderate: The position requires minimal physical effort and the workday comprises mainly sitting, with frequent position changes. This position may involve routine exposure to persons with contagious or infectious illnesses and requires constant attention to infection control procedures.

**MENTAL DEMANDS:**

The Clinical Social Worker must be able to make decisions based on the best information and evidence that is available. An ability to exhibit critical thinking and deductive reasoning is vital. The position may involve occasional exposure to highly emotional or violent patients. The Clinical Social Worker may frequently be exposed to circumstances that include unpredictable emotions and behaviours.

**FINANCIAL RESPONSIBILITY:**

May participate in the expenditure of resources where approved.

**IMPACT OF ERRORS IN JUDGEMENT:**

Poor decisions and/or omissions can impact harmfully on patient health and coping. The level of impact could range from very low to extremely high.

Poor interpersonal skills could impact negatively on relations with staff, community partners, patients and public. The level of impact could range from very low to very high.

**WORK ENVIRONMENT:**

The work environment will primarily be in well-lit, well-ventilated office areas that are furnished ergonomically. Personal office space may or may not be shared.

Environment may vary depending on FHT location. Ergonomics, health and safety of the social worker will be an important consideration when the location is furnished and equipped. It may be required to bring some requisite equipment and supplies when reporting to work in these environments.

***Other***

Due to the collaborative nature of this position, the Clinical Social Worker will be required to attend meetings at other organizations offices. Travel may be required between sites and patient homes. Travel will be reimbursed in accordance with FHT mileage policy.

**REPORTING RELATIONSHIPS:**

The Clinical Social Worker reports to the Executive Director. In clinical matters, the Clinical Social Worker collaborates with physicians and other FHT staff to provide the most efficient, appropriate primary care to a patient of the FHT. The Clinical Social Worker collaborates with other community health partners to deliver appropriate services and programs to the community.